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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTORNEY DOCKET NUMBER
10/696,909	10/29/2003	James B. Lorens	021044-005820US

CONFIRMATION NO. 9257

FORMALITIES LETTER



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20350
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Date Mailed: 12/21/2004

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PART 2 - COPY TO BE RETURNED WITH RESPONSE



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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/696,909
		Filing Date	October 29, 2003
		First Named Inventor	Lorens, James B.
		Art Unit	1642
		Examiner Name	Not yet assigned.
Total Number of Pages in This Submission		Attorney Docket Number	021044-005820US

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input checked="" type="checkbox"/> CD, Number of CD(s) <u>1</u> <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Return Postcard; copy of Notice to Comply with...Sequence..Disclosures; Communication Under 37 CFR 1.821-1.825 and Preliminary Amendment; paper sequence listing (103 pages)
		Remarks <input type="checkbox"/> The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Townsend and Townsend and Crew LLP		
Signature	<i>Annette S. Parent</i>		
Printed name	Annette S. Parent		
Date	2/18/05	Reg. No.	42,058

CERTIFICATE OF MAILING			
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Typed or printed name	Karen Karlin	Date	2-18-05